PTO/SB/17 (16-07)
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Effective on 12/08/ Fees pursuant to the Consolidated Approp	Complete if Known Application Number 10/532,398-Conf. #1581						
FEE TRANS	· ppineamen · · · ·		October 12, 2005				
	1 3 - 7		Hannu MIKKONEN				
For FY 2008				J. S. Lau			
Applicant claims small entity stat	Artilinit	Art Unit 1623					
TOTAL AMOUNT OF PAYMENT (\$) 120.00					0365-0627PUS1		
METHOD OF PAYMENT (check	all that sont/A		_				
Check Credit Card		one Other	please identif	y):			
X Deposit Account Deposit Account	Number: 02-2448	Deposit	Account Name	Birch, Stewa	rt, Kolasch & B	Sirch, LLP	
For the above-identified depo	sit account, the Director	is hereby authorize	ed to: (chec	k all that apply)			
x Charge fee(s) indicated	below	Charg	e fee(s) ind	licated below, e	xcept for th	ne filing fee	
Charge any additional t	ee(s) or underpayments	of X Credit	any overpa	numante		_	
fee(s) under 37 CFR 1.			any overpo	ayinens			
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND E		EARCH FEES	CV410	IATION FEES			
	Small Entity	Small Entity		Small Entity			
Application Type Fee (\$		\$) Fee (\$)	Fee (\$)	Fee (\$)	Fees P	'ald (\$)	
Utility 310	155 510		210	105			
Design 210	105 100		130	65			
Plant 210	105 310		160	80			
Reissue 310	155 510		620	310			
Provisional 210	105	0	0	0			
2. EXCESS CLAIM FEES						Small Entity	
Fee Description Each claim over 20 (including Reissues)					Fee (\$) 50	Fee (\$)	
Each independent claim over 3 (including Reissues)					210	25 105	
Multiple dependent claims					370	185	
Total Claims Extra Claims	Paid (\$)	M	Ittiple Depend		103		
Total Claims Extra Claims Fee (\$) Fee		raid (4)			Fee Paid (\$)	1	
HP = highest number of total claims paid for	if greater than 20.		1.0	- 102	COUT WIND IN	•	
Indep. Claims Extra Claims	Fee (\$) Fee	Paid (\$)				-	
	·						
HP = highest number of independent daims	paid for, if greater than 3.						
3. APPLICATION SIZE FEE							
If the specification and drawings en listings under 37 CFR 1.52(e)),							
sheets or fraction thereof. See 3			OI SHAH OI	inty) for each a	uditional 20	'	
Total Sheets Extra Sheet		additional 50 or frag	tion thereof	f Fee (\$)	Fee P	Paid (\$)	
- 100 =	/50 ==	(round up to a who					
4. OTHER FEE(S)		•			Fees	Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00							
SUBMITTED BY						=	
Signature OSFM	NA	Registration No. (Attorney/Agent)	28,977	Telephone	(703) 205	5-8000	
Name (Print/Type) Gerale M. Murphy	10/			Date	UL 7	2008	
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